## City of San Marcos City Council/Council Appointee/P&Z Commissioner Annual Financial Disclosure Form

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- 1. This report covers the reporting period from: January 1, 2017 to December 31, 2017 (see attached email)
- 2. Do not leave items blank. If item is not applicable, mark NA or NONE.
- 3. Attach information on additional pages, if necessary.

Name: Mark Conrad Gleason	
Residence address: 909 Conway Dr. San Marcos Title of position held with the City: Planning and Zoning V Name of spouse: Ruah Suzanne Gleason	STX 786606
Title of position held with the City: Planning and Zoning V	ice Chairmo
Name of spouse: Ruah Suzanne Gleason	NA or NONE
Names of all dependent children:	NA or NONE
Names under which you, your spouse, or any of your dependent children do business:  1.	NA or NONE
2.	
3.	

NOTE – You may use the following reporting categories to describe amounts and values:

**Category I** — At least \$100.00 but less than \$10,000.00

Category II - At least \$10,000.00 but less than \$20,000.00

**Category III** – At least \$20,000.00 but less than \$50,000.00

Category IV - At least \$50,000.00 but less than \$75,000.00

**Category V** - At least \$75,000.00 but less than \$100,000.00 **Category VI** - \$100,000.00 or more - report to nearest \$100,000.00

1. Identify each source of income amounting to more than \$100.00 received in the reporting period by you, your spouse, or any of your dependent children:

NA or NONE

Name & full address of income source	Nature of income [e.g., salary, dividends, rent, etc.]	Amount of income [by reporting category]	Income of [e.g., self, spouse, or dependent child]
Autozone 619 South Guadalype St San Marcos TX 76666	Salary	III	Sclf
Hays CISD-Tobial Elem. School 21003 IH35 KyleTX79	Salary 1040	工工	spouse

2. Identify each option held, own children during the reporting period		your spouse, o	or any of your d NA or N	ependent ONE
Nature of option [real estate, stock, etc.]	Amount of transaction [by reporting category]	Name & to the tra	full address of onsaction	other parties
3. Identify each business entity, n				
dependent children was a partner, beneficiary during the reporting p	eriod:	of the board of	NA or N	
Name & full address of business of	or nonprofit entity or union	Position held	<u> </u>	
4. Identify each business entity, dependent children had an owner during the reporting period:				.00 at any tim
Name & full address of business or nonprofit entity or union	Description of ownership interest [e.g., owner, partner, stockholder]	Value of ownership interest [by reporting category]	Number of shares held/shares issued [if applicable]	Net gain or loss from sale of stock [by reporting category]

<ol> <li>Identify any real property had an interest as owner, be or board member, officer or</li> </ol>	neficial owner (holder or	f a mortgage), business	owner (partner in	a partnership ler:
Full address or legal description	Name & full address of owner(s) [if other than you, your spouse or children]	Fair market value [by reporting category] and present use	For leased property, annual rental amount [by reporting category]	Homestead exemption on this property?
909 (on way Drive San Marcos TX 76 lolole		residence \$170,000		No
5. Identify persons, busine				
children owed a debt of mor related within the second de reported as required by law	egree of consanguinity on:	r affinity, or loans to a	political campaig NA or NC	n which wer
Name & full address of per guarantor to which debt wa	as owed	Amount of debt [by reporting catego	Amount of during reporting	orting period
Small Business Washington I	Association D.C.	\$24,000	I	÷
Lone Start 720 E. Hopk	itle Loan ins SanMarco	\$2,500 ¢	) I	
Americani E Services Har	CONCATOO	\$27,000	T	
7. Provided this information owed you, your spouse, or a period (not including debts	ny of your dependent ch	ildren a debt of more th	an \$100.00 during	the reporting ty or affinity
Name & full address of perguarantor that owed the de		Amount of debt [by reporting category]	Amount of rep during reporti [by reporting ca	ng period

Name & full address of person, business guarantor that owed the debt	entity or	Amount of debt [by reporting category]	Amount of repayme during reporting pe [by reporting category
•			
8. Identify the source of each gift or accurace received during the reporting period by your sound by another person for the use and benefit including (1) a gift received from a relativistate succession or as distribution from ancestor):	ou, your s it of you, ve if giver	pouse, or any of your de your spouse, or any of a because of kinship, or	ependent children, or n your dependent child (2) a gift received by
Name & full address of source of gift(s)	Descript	tion of gift(s)	Amount or value of by reporting category
			[by reporting category
		<u> </u>	
9. Provided this information is not privile entity during the reporting period, list all cincome during the reporting period:  Name & full address of customer			

your spouse, or any of your deper	in any franchisee of the City held during the dent children [note: franchise holders are A	A)Time Warner Cable, B)
Pedernales Electric Cooperative, C)	Bluebonnet Electric Cooperative, and D) Co	NA or NONE
Name of franchise holder	Description of financial interest held [stock, mortgage, note etc.]	Value of financial interest [by reporting category]
	g the reporting period by you, your spouse, on the chise issued by the City, other than as a customer than a custom	
Name of franchise holder	Description of transaction	Value of transaction [by reporting category]
	·	
disclosure applies to a family member government officer. I also acknowle	of perjury that the above statement is true and core (as defined by Section 176.001(2), Local Governor that this statement covers the 12-month p	ernment Code) of this local
176.003(a). Local Government Code  CESLY BURRELL  Notary ID #11358586  My Commission Expires	Signature of Local Government	t Officer/Annointed Official
October 3, 2021	_	Officent appointed Official
Sworn to and subscribed before me, by	0	the <u>Znd</u> day of
Signature of officer administering oath	Cesh Birell Printed name of officer administering oath  Title	entofficer administering out

## Moreno, Tina

From: Burrell, Cesly

Sent: Monday, May 7, 2018 12:53 PM

To: Moreno, Tina

Subject: FW: [EXTERNAL] Re: Annual Disclosure

See below. Thanks.



## **Cesly Burrell**

Administrative Coordinator | Planning & Development Services 630 E Hopkins, San Marcos, TX 78666 512.393.8231

From: Ruah Gleason

Sent: Monday, May 7, 2018 10:40 AM

To: Burrell, Cesly <CBurrell@sanmarcostx.gov> Subject: [EXTERNAL] Re: Annual Disclosure

Yes. That's true. Sorry. Do I need to do anything to correct this? MG

Sent from my iPad

On May 4, 2018, at 9:33 AM, Burrell, Cesly < CBurrell@sanmarcostx.gov> wrote:

Good morning Commissioner Gleason,

It looks like we missed filling out the disclosure period on your form. Please verify that the information is from January 1, 2017 – December 31, 2017. Thanks.

<image001.jpg> Cesly Burrell

Administrative Coordinator | Planning & Development Services

630 E Hopkins, San Marcos, TX 78666 512.393.8231

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